

As a below-named inventor, I hereby declare that:

(1) My residence, post office address and citizenship are as stated below next to my name.

(2) I am the original, first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled "Medium Voltage Motor Control Center Load Discharge Device," Attorney Docket No. SPE-38, the specification of which:

 X is attached hereto.

 was filed on as Application Serial No. .

(3) I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

(4) I acknowledge the duty to disclose all information known to me to be material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

(5) I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN APPLICATION(S)

			Priority Claimed
(Number)	(Country)	(Day/Month/Year Filed)	Yes or No
			Priority Claimed
(Number)	(Country)	(Day/Month/Year Filed)	Yes or No

(6) I hereby claim the benefit under Title 35, United States Code, §120 of any United States Application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a), regarding events which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing Date)	(Status)
(Application Serial No.)	(Filing Date)	(Status)

FILED IN 1003754-123401

(7) I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Larry I. Golden, Registration No. 29,068
Michael J. Femal, Registration No. 27,784
David R. Stacey, Registration No. 33,794
Kareem M. Irfan, Registration No. 32,326
Larry T. Shrout, Registration No. 35,357; all with Square D Co.

Direct all telephone calls to: David R. Stacey, (847) 925-3458
Address all correspondence to: Larry I. Golden, Square D Company, 1415 South Roselle Road,
Palatine, IL 60067.

(8) I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Inventor's Full Name:	<u>Gene</u>	<u>Alvarez</u>
	(First)	(Last)
Inventor's Signature:	<hr/>	
Date of Execution:	<hr/>	
Residence:	<u>2560A Dixon Ct., Murfreesboro, Tennessee USA 37128</u> (Include number, street name, city, state, and country)	
	<hr/>	
Citizenship:	<u>U.S.A.</u>	
Post Office Address:	<hr/>	
	(If different from Residence Address)	

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Inventor's Full Name: Brian Walker
(First) (Initial) (Last)

Inventor's Signature: _____

Date of Execution: _____

Residence: 207 Leenna Lane, Lebanon, Tennessee, USA 37090
(Include number, street name, city, state, and country)

Citizenship: U.S.A.

Post Office Address: _____
(If different from Residence Address)

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Inventor's Full Name: Eldridge R. Byron
(First) (Initial) (Last)

Inventor's Signature: _____

Date of Execution: _____

Residence: 1730 Somerset Drive, Murfreesboro, Tennessee USA 37129
(Include number, street name, city, state, and country)

Citizenship: U.S.A.

Post Office Address: _____
(If different from Residence Address)

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Inventor's Full Name: Mary B. Groff
(First) (Initial) (Last)

Inventor's Signature: _____

Date of Execution: _____

Residence: 783 Tri Cities Farm Road, Winchester, Tennessee, USA 37398
(Include number, street name, city, state, and country)

Citizenship: U.S.A.

Post Office Address: _____
(If different from Residence Address)